

want to take the extra 10 minutes to go to a further hospital. She said: I know about the hospital that was closer. It is a hospital with a reputation for taking a look at a patient who is coming in and seeing the dollars and cents, the profit and loss. I didn't want my medical care to be the function of someone else's calculation of profit and loss.

This is from a woman in an ambulance with a brain injury. My point is very simple. This country needs to have some basic protections for patients, and the patients want those protections. Especially with the growth of managed care organizations, many of whom do a fine job, but some of whom do not, we need these protections.

We need to say, as a matter of public policy in this country, patients have certain rights. Yes, you have a right to know all of your options for medical treatment, not just the cheapest one the managed care organization might want to tell you about.

Yes, you have a right to an emergency room when you have an emergency. Yes, you have a right to be able to see the specialist you need when you need to see one. Yes, you have a right, if your spouse is being treated for breast cancer and you have changed jobs, for your wife to see that same oncologist who has been working with for her for the last 5 years to fight her breast cancer. You ought to have that right, and this legislation will give you that right.

We will have Senators who will assert that this is a bill about trying to create more lawsuits. It is not that at all. It is about trying to provide patient protections. As I said when I started, the managed care organizations have all the lawyers they need. They can hire all the lawyers they need and want unimpeded. No one is going to come to the Chamber from the other side and talk about limiting the rights of the big managed care organizations or insurers to hire lawyers, are they? I don't think so. But they will say: We don't want patients to have access to attorneys to hold managed care organizations accountable.

This is all about accountability. The Red Cross can be held accountable. Boy Scouts can be held accountable. Everybody can be held accountable except, in these circumstances, managed care organizations. This piece of legislation says everybody ought to be held accountable.

This is not about lawyers, this is about getting the right care to patients when they need it.

I suspect we will debate this for a couple of weeks. We have had this debate before. This legislation has changed from that time. For example, we hear from small businesses, who are now getting mailings around the country, saying: If Congress passes this Patients' Bill of Rights, this is going to

break our small businesses because we will be held accountable. That is not true. In fact, this has changed so that we use exactly the same language the majority party used in its substitute in 1999. This bill isn't in any way putting in jeopardy small businesses. We don't hold them accountable. They are not accountable at all in circumstances where they have not had direct participation in making decisions about patient care. They are not accountable in that circumstance and should not be accountable because they were not making the decision.

This is about managed care organizations and patients and the relationship between the two and the rights patients ought to have.

I have other pictures. I have other stories. I will at some point later describe more of them in terms of what is "medically necessary" because by deciding what is medically necessary is another very important way in which HMOs can withhold treatment.

I am going to show a poster on the issue of medical necessity that is a little more subtle than perhaps the other one I used but just as important. Brenna Nay was born in 1987. She has abnormal facial features characteristic of what is called Hajdu-Cheney syndrome. The shape of her skull is distorted. She had no chin. The question is, is it medically necessary to treat this young lady?

Let me show the result after surgery. They built this young woman a chin. After surgery, does that improve that young woman's life? Is this something you ought to expect would be covered in a health plan? In my judgment, it should.

I have other pictures that are similar. I will use them later.

This "medically necessary" issue is critically important. I feel passionate about these health care issues. I have lost a member of my family. I have sat in intensive care day after day after day and know what it is like to lose a member of my family in a circumstance I can hardly begin to describe. In my case, my loss didn't have anything to do with the managed care organization withholding treatment. But I understand the passion of parents. I understand the passion of people who are fighting for their lives, who are struggling and fighting mightily against dread diseases and illnesses they know can kill them and then discover they not only have to waste the emotional energy to wage war against cancer or heart disease or so many other problems, but they also have to try at the same time to fight a managed care organization that ought to be covering that which is in their health care plan.

That is not right. That is not fair. These are the types of problems this piece of legislation is designed to try to address. If we can pass this legislation,

the country will be a significant step ahead in dealing with patients' needs and protections.

Mr. President, I yield the floor and suggest the absence of a quorum.

The PRESIDENT pro tempore. The clerk will call the roll.

The bill clerk proceeded to call the roll.

(Mr. DORGAN assumed the chair.)

Mr. REID. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. DAYTON). Without objection, it is so ordered.

THE VERY BAD DEBT BOXSCORE

Mr. HELMS. Mr. President, at the close of business Friday, June 15, 2001, the Federal debt stood at \$5,632,910,105,449.16, five trillion, six hundred thirty-two billion, nine hundred ten million, one hundred five thousand, four hundred forty-nine dollars and sixteen cents.

One year ago, June 15, 2000, the Federal debt stood at \$5,644,607,000,000, five trillion, six hundred forty-four billion, six hundred seven million.

Twenty-five years ago, June 15, 1976, the Federal debt stood at \$612,128,000,000, six hundred twelve billion, one hundred twenty-eight million, which reflects a debt increase of more than \$5 trillion, \$5,020,782,105,449.16, five trillion, twenty billion, seven hundred eighty-two million, one hundred five thousand, four hundred forty-nine dollars and sixteen cents during the past 25 years.

ADDITIONAL STATEMENTS

HONORING COLONEL JAMES GARRARD JONES, FIRST MAYOR OF EVANSVILLE

• Mr. LUGAR. Mr. President, I rise today to honor a true pioneer in public service, Colonel James Garrard Jones.

Colonel Jones was born in Paris, KY on July 3, 1814, but soon became a resident of the great State of Indiana when his family moved there in 1819. This move was Indiana's good fortune, for it did not take long for Colonel Jones to become involved in public life.

The young Colonel Jones served as Surveyor and Deputy Recorder of Vanderburgh County, leaving a lasting mark as the county's early field notes and books of deeds and mortgages appear in his handwriting. He went on to serve as Evansville Trustee and Evansville Attorney under the town corporation. In 1847, Colonel Jones's efforts in the establishment of a city government culminated with his election as first Mayor of Evansville. He won reelection as Mayor in 1850.

Colonel Jones took his service to the State level with his election as Attorney General of Indiana in 1860. But